



SUPPLEMENTAL APPLICATION DATA SHEET FORM

Inventor Information

Inventor One Given Name:: Abraham R.
Family Name:: McAllister
Name Suffix::
Postal Address Line One:: 294 Sidney Street
Postal Address Line Two::
City:: Cambridge
State or Province:: MA
Country:: United States of America
Postal or Zip Code:: 02139
City of Residence:: Cambridge
State or Province of Residence:: MA
Country of Residence:: United Untied States of America
Citizenship Country:: United States of America

Inventor One Given Name:: Michael A.

Family Name:: Butler
Name Suffix::
Postal Address Line One:: 4 Napier Road
Postal Address Line Two::
City:: Andover
State or Province:: MA
Country:: United States of America
Postal or Zip Code:: 01810
City of Residence:: Andover
State or Province of Residence:: MA
Country of Residence:: United States of America
Citizenship Country:: United States of America

Inventor One Given Name:: Stephen D.

Family Name:: Senturia
Name Suffix::
Postal Address Line One:: 98 Crowninshield Road
Postal Address Line Two::
City:: Brookline
State or Province:: MA
Country:: United States of America
Postal or Zip Code:: 02446
City of Residence:: Brookline
State or Province of Residence:: MA
Country of Residence:: United States of America
Citizenship Country:: United States of America

Supplemental Application Data Sheet Form

Correspondence Information

Name Line One:: Jeffrey B. Powers
Name Line Two:: Lowrie, Lando & Anastasi, LLP
Address Line One: One Main Street
City:: Cambridge
State or Province:: MA
Country:: U.S.A.
Postal or Zip Code:: 02142
Telephone One:: (617) 395-7000
Telephone Two::
Fax Number: (617) 395-7070
Electronic Mail::

Application Information

Title Line One:: METHODS AND APPARATUS FOR
MONITORING THE STRENGTH OF CARRIERS
IN AN OPTICAL COMMUNICATION SYSTEM
Total Drawing Sheets:: 9 pp.
Formal Drawings?:: No
Claims:: 34
Application Type:: Utility
Docket Number:: P0743-70005 -7005

Representative Information

Representative Customer Number:: 37462

Assignee Information:

Assignee name:: Polychromix, Inc.
Street of mailing address:: 10 State Street
City of mailing address:: Woburn
State or Province of mailing address:: MA
Postal or Zip Code of mailing address:: 01801